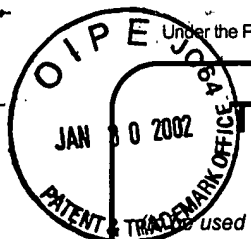


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TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i>	Application Number	09/449,001	
	Filing Date	November 24, 1999	
	First Named Inventor	Senn	
	Group Art Unit	0739 2684	
	Examiner Name	SM TRAN, Pablo	
Total Number of Pages in This Submission	6*	Attorney Docket Number	BCK-002.01

*excluding References BBT-BBU		ENCLOSURES (check all that apply)	
<input checked="" type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Assignment Papers (for an Application)	<input type="checkbox"/> After Allowance Communication to Group	
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences	
<input type="checkbox"/> Amendment / Response	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)	
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition Routing Slip (PTO/SB/69) and Accompanying Petition	<input type="checkbox"/> Proprietary Information	
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Status Letter	
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):	
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<input checked="" type="checkbox"/> Information Disclosure Statement, together with References BBT-BBU.	<input type="checkbox"/> Request for Refund	Disclosure Statement Under 37	
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> CD, Number of CD(s) _____	CFR 1.97; and	
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FEE TRANSMITTAL for FY 2002

Patent fees are subject to annual revision.

Complete if Known

Application Number 09/449,001

Filing Date November 24, 1999

First Named Inventor Senn

Examiner Name NYA

Group / Art Unit 2739

Attorney Docket No. BCK-002.01

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<p>FEE CALCULATION</p> <p>1. BASIC FILING FEE</p> <table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th>Large Fee Code</th> <th>Large Entity Fee (\$)</th> <th>Small Fee Code</th> <th>Small Entity Fee (\$)</th> <th>Fee Description</th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr><td>101</td><td>740</td><td>201</td><td>370</td><td>Utility filing fee</td><td></td></tr> <tr><td>106</td><td>330</td><td>206</td><td>165</td><td>Design filing fee</td><td></td></tr> <tr><td>107</td><td>510</td><td>207</td><td>255</td><td>Plant filing fee</td><td></td></tr> <tr><td>108</td><td>740</td><td>208</td><td>370</td><td>Reissue filing fee</td><td></td></tr> <tr><td>114</td><td>160</td><td>214</td><td>80</td><td>Provisional filing fee</td><td></td></tr> <tr> <td colspan="5">SUBTOTAL (1)</td> <td>(\$ 0)</td> </tr> </tbody> </table>					Large Fee Code	Large Entity Fee (\$)	Small Fee Code	Small Entity Fee (\$)	Fee Description	Fee Paid	101	740	201	370	Utility filing fee		106	330	206	165	Design filing fee		107	510	207	255	Plant filing fee		108	740	208	370	Reissue filing fee		114	160	214	80	Provisional filing fee		SUBTOTAL (1)					(\$ 0)																																																																																																												
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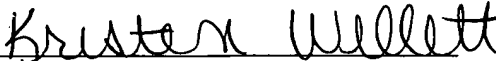
SUBMITTED BY				Complete (if applicable)	
Name (Print/Type)	Kevin A. Oliver	Registration No. Attorney/Agent	42,049	Telephone	(617) 832-1241
Signature				Date	12/31/01

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